

4. Adult Care Home Personal Care (ACH/PC) Coverage

4.1 Who is Covered for ACH/PC

Adult care home residents who are eligible for "regular" Medicaid (blue MID card) and either Special Assistance for the Aged or Disabled (SAA or SAD) or Special Assistance for the Blind (SAB) and are not "disenfranchised", qualify for Medicaid coverage of Adult Care Home Personal Care (ACH/PC) provided by the home's personal care aides according to a physician-authorized care plan.

4.2 What is Covered

ACH/PC coverage includes the performance of one or more personal care tasks daily for the resident by qualified personal care aides. For guidance on the qualifications of adult care homes' personal care aides who may be assigned to perform these tasks, see Section 6 of this Manual. Assistance with personal care tasks under ACH/PC may include supervising and prompting a resident's self-performance of tasks, as well as providing hands-on and weight-bearing assistance when necessary.

- assist residents with toileting and maintaining bowel and bladder continence;
- assist residents with mobility and transferring;
- provide care for normal, unbroken skin;
- assist with personal hygiene to include mouth care, hair and scalp;
- grooming, care of fingernails, and bathing in shower, tub, bed basin;
- trim hair;
- shave resident;
- provide basic first aid;
- assist residents with dressing;
- assist with feeding residents with special conditions but no swallowing difficulties;
- assist and encourage physical activity;
- take and record temperature, pulse, respiration, routine height and weight;
- trim toenails for residents without diabetes or peripheral vascular disease;
- perineal care;
- apply condom catheters;
- turn and position;
- collect urine or fecal specimens;
- take and record blood pressure if a registered nurse has determined and documented staff to be competent to perform this task;
- empty and record drainage of catheter bag;
- test urine or fecal specimens;
- non-sterile dressing procedures;
- force and restrict fluids;
- administration of drugs as required by applicable Licensure rules;
- supervision of residents as required by applicable Licensure rules;

- applying and removing ace bandages, ted hose, and binders;*
- feeding techniques for residents with swallowing problems;*
- bowel or bladder training programs to regain continence;*
- enemas, suppositories and vaginal douches;*
- positioning and emptying of the urinary catheter bag and cleaning around the urinary catheter;*
- chest physiotherapy or postural drainage;*
- clean dressing changes;*
- collecting and testing of fingerstick blood samples;*
- care of well established colostomy or ileostomy;*
- care for pressure ulcers;*
- inhalation medication by machine;*
- maintaining accurate intake and output data;*
- medication administration through gastrostomy feeding tube;*
- medication administration through injection;*
- oxygen administration and monitoring;*
- the care of residents who are physically restrained and the use of care practices as alternatives to restraints;*
- oral suctioning;*
- care of well established tracheostomy; *
- administering and monitoring of gastrostomy tube feedings; or*
- attending to any other personal care needs, scheduled or unscheduled, residents may be unable to meet for themselves.

**Denotes personal care tasks that require licensed health professional support (see section 6.3). Refer to applicable licensure rules.*

In addition to the personal care tasks listed above, additional personal care tasks may also be provided as ACH/PC when performed according to the rules under which the adult care home is licensed and applicable rules of the North Carolina Board of Nursing.

4.3 How Is It Paid

Under ACH/PC coverage, residents qualify for a fixed daily payment (Basic ACH/PC) to the adult care home for providing personal care assistance. Basic ACH/PC is paid at two rates based on the size of the facility (number of licensed beds in the facility). There is one rate for facilities with less than thirty-one total licensed beds and a separate rate for facilities with thirty-one or more total licensed beds, see Appendix I. Medication administration is included in the applicable Basic ACH/PC payment.

Individuals who also meet Medicaid criteria for being "heavy care" residents qualify for higher ACH/PC payments to cover the costs of their extra care needs and are eligible for case management services. These "Enhanced" ACH/PC payments are paid at four daily rates based upon the type of assistance needed by the heavy care resident with eating, toileting, eating and toileting, and ambulation/locomotion. Instructions for filing claims for ACH/PC are in Section 11 of this Manual.

For guidance on identifying heavy care residents and obtaining an authorization to bill for Enhanced ACH/PC payments, see Section 8.

4.4 Limitations on Coverage

- **Prior Approval:**

You must have an ACH/CMS case manager's authorization before you can receive Enhanced ACH/PC payments for a heavy care resident. For more information, see Section 8.

- **Copayment:**

You may not require a copayment from residents for providing ACH/PC.

- **Therapeutic Leave:**

Medicaid will continue coverage of ACH/PC when the resident takes therapeutic leave. A resident is limited to no more than 60 therapeutic leave days (nursing facility and Adult Care Home combined) per calendar year. For more information, see Section 7.4.

- **Limitations in Relation to Other Services:**

Some other services a resident receives may duplicate care provided as ACH/PC. Which one is the more appropriate service for the resident depends on the situation:

Hospice - You may not bill for ACH/PC for a resident who has elected the Medicare or Medicaid Hospice benefit, nor prevent the resident from electing Hospice care. The Hospice benefit covers all home health aide and homemaker services needed by the hospice patient for his terminal illness. You may negotiate reimbursement for providing personal care assistance for the resident with the hospice provider.

CAP-MR/DD Personal Care - If you are enrolled as both an adult care home provider and a CAP provider, you may not bill for providing CAP-MR/DD Personal Care assistance instead of ACH/PC for the resident. CAP-MR/DD Personal Care cannot be provided in an adult care home.

4.5 Documentation Requirements

Adult care homes are required by law to track staff time spent in providing personal care assistance for residents and to report the cost of providing the service. Medicaid does not require providers to include this information in service documentation. Questions about cost reporting requirements and recording personal care time should be directed to the Office of the Controller (See Appendix B "Cost Reporting"). Guidance on documenting the provision of ACH/PC services for Medicaid reimbursement is in Section 10 of this Manual.

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